

VIRGINIA: IN THE CIRCUIT COURT OF CHESAPEAKE

CIVIL COURT

MARION D HILL -my^{le}Leau
Plaintiff

v.

Case No. C411-578

United of Omaha: Mutual of Omaha Insurance Company
Mutual of Omaha Plaza
Omaha, Nebraska 68175

Defendant

COMPLAINT

COME NOW the Plaintiff, Marion D Hill, who moves the Court by way of complaint to award judgment to said plaintiff against defendant, United of Omaha: Mutual of Omaha Insurance Company in the amount of \$250,000 by reason of the following:

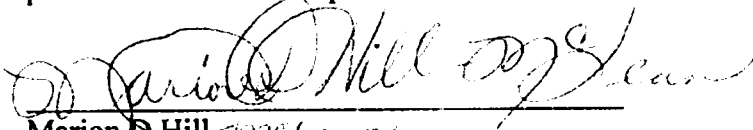
1. The Plaintiff had a life insurance policy with Mutual of Omaha for a death benefit of \$50,00 and the insurance company defrauded and acted in bad faith against the Plaintiff only paying \$10,000 and falsely claiming the Plaintiff voluntarily reduced the claim. Misrepresenting pertinent facts or insurance policy provisions relating to coverages at issue with James Hill's policy.
2. The Defendant Mutual of Omaha failing to promptly settle claims, where liability has become reasonably clear, under one portion of the insurance policy coverage in order to influence settlements under other portions of the insurance policy coverage;
3. The Defendant, Mutual Omaha Life Insurance Company, including, but not limited to, making command decisions to wrongfully and in bad faith deny plaintiff's claim, initiating and approving conduct designed solely to harass and humiliate plaintiff and cause her mental distress, with intent to intimidate plaintiff into abandoning her claim or settling for a mere fraction of the benefits to which plaintiff was entitled and for which plaintiff had paid premiums. [Consumer Protection Act, RCW 19.86.140, State v. Ralph Williams' N.W. Chrysler Plymouth, Inc., 87 Wn.2d 298, 553 P.2d 423 (1976), appeal dismissed, 430 U.S. 952 (1977), and that an

Exhibit A

insurance company which breaches its duty to act in good faith is subject to liability under the act. Salois v. Mutual of Omaha Ins. Co., 90 Wn.2d 355, 581 P.2d 1349 (1978).]

4. The Defendant Mutual Omaha Life Insurance Company pay actual and consequential damages as well as punitive damages to Plaintiff.

Wherefore, the Plaintiff, Marion D Hill, move the Court for a judgment against the Defendant, United of Omaha: Mutual of Omaha Insurance company in the amount of \$250,000 and her cost incurred in the prosecution of this complaint.


Marion D Hill *MLH*
702 Windy Rd
Chesapeake, VA 23325
(757) 803-7619

CERTIFICATE OF SERVICE

I hereby certify that a true copy of the foregoing Complaint was delivered via U. S. Mail United of Omaha: Mutual of Omaha Insurance Company, Mutual of Omaha Plaza, Omaha, Nebraska 68175, this , day of February , 2011


Marion D Hill *MLH*

3-23-11
Date

Floor	Department
8	INDIVIDUAL CLAIMS
3	IND ANN SERVICES
4	SPECIAL RISK SERVICES
3	PREMIUM SERVICES INDEX
S6	MEDICARE
3	POS
3	Legal
BF	MAILING — CMRU

Policy/Group Number _____
 Report Number _____
 Comments _____

☐ No dep coverage ☐ No Major Medical
☐ Please send letter from your area
☐ No other coverage found

This corr was sent to your area after reviewing the Online System checked
above. If the corr does not belong in your area, please return immediately
o BF - Mailing — CMRU.

MLU19794_0807

[illegible]

United of Omaha of Omaha & Co.
Department of Omaha & Co.
Omaha & Co.
C 2175 -



UAC 316383

**PETITION FOR PROCEEDING IN CIVIL CASE
WITHOUT PAYMENT OF FEES OR COSTS
COMMONWEALTH OF VIRGINIA**

Case No.

CL 11-578

☐ General District Court
☐ Juvenile & Domestic Relations District Court
☒ Circuit Court

Chesapeake

marion Hill McLean v. United of Omaha Mutual of Omaha

The undersigned petitioner(s) request the court to permit the petitioner(s) to sue or defend a civil case in this court without the payment of fees or costs and to have from all officers all needful services and process. In support of the petition, the petitioner(s) state that the following information is true:

- The undersigned petitioner(s) are Virginia resident(s).
- The following financial information applies to the petitioner(s):
 - Receiving public assistance ☐ No ☒ Yes-See items checked below
☒ Medicaid ☒ Supplemental security income ☒ TANF ☒ Food stamps
 - Take-home pay \$ _____ per ☐ week ☐ every second week
☐ twice a month ☒ month
 - Other income, if any (specify sources and amounts): _____
 - Assets Cash on hand \$ 0 Bank accounts \$ 50.00

3. Other information

- The number of people for whom the petitioner(s) provide support is: _____
- The number of persons residing with the petitioner(s) is: _____
- Complete if applicable:
 In custody at 702 Windy Rd Chesapeake Va 23325

ACKNOWLEDGEMENT

I understand that the court cannot provide me with legal advice, and that it may be advisable to get advice from a lawyer.

3-8-11

DATE

Marion Hill McLean
 SIGNATURE - PETITIONER

SIGNATURE - PETITIONER

NAMES OF PETITIONERS

ORDER

- ☒ The petition is granted.
☐ The petition is denied.

03.17.11

DATE

[Signature]
 JUDGE

FORM CC-414 MASTER 11-06
 VA. CODE §§ 16.1-69.48.4; 17.1-606

700 MAILING MAR 28 2011